

FORM
2

Rev
12/05

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

OIL ☐ GAS ☒ COALBED ☐ OTHER _____
SINGLE ZONE ☐ MULTIPLE ☒ COMMINGLE ☐

Refiling ☒
Sidetrack ☐

Document Number:

400197841

Plugging Bond Surety

20030110

3. Name of Operator: WHITING OIL AND GAS CORPORATION

4. COGCC Operator Number: 96155

5. Address: 1700 BROADWAY STE 2300

City: DENVER State: CO Zip: 80290

6. Contact Name: MARIE OKEEFE Phone: (303)495-6775 Fax: (303)495-6777

Email: MARIE.OKEEFE@WHITING.COM

7. Well Name: BOIES Well Number: C-27K-K3N

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 14783

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 27 Twp: 2S Rng: 98W Meridian: 6

Latitude: 39.845971 Longitude: -108.381502

Footage at Surface: 2235 feet FNL/FSL 2553 feet FEL/FWL
FSL FWL

11. Field Name: SULPHUR CREEK Field Number: 80090

12. Ground Elevation: 6436 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 07/29/2011 PDOP Reading: 1.7 Instrument Operator's Name: D. PETTY

15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 2235 FSL 2553 FWL 2035 FSL 2553 FWL
Bottom Hole: FNL/FSL 2035 FSL 2553 FWL
Sec: 27 Twp: 2S Rng: 98W Sec: 27 Twp: 2S Rng: 98W

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 350 ft

18. Distance to nearest property line: 410 ft 19. Distance to nearest well permitted/completed in the same formation: 2 mi

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
DAKOTA	DKTA			
FRONTIER	FRTR			
NIOBRARA	NBRR			

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: _____

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#: _____

☒

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? Yes ☐ No ☐

23b. If 23 is No: ☐ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bond ☐ \$2,000 Surface Bond ☐ \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
A LEASE MAP IS ATTACHED.

25. Distance to Nearest Mineral Lease Line: 610 ft 26. Total Acres in Lease: 1160

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? ☐ Yes ☒ No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? ☐ Yes ☒ No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? ☐ Yes ☒ No

30. If questions 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? ☐ Yes ☒ No

31. Mud disposal: ☒ Offsite ☐ Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

Method: ☐ Land Farming ☐ Land Spreading ☒ Disposal Facility Other: _____

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	24	20	94	0	60			
SURF	17+1/2	13+3/8	54.5	0	1,900	1,180	1,900	0
1ST	12+1/4	9+5/8	40	0	5,300	960	5,300	0
2ND	8+1/2	7	29	0	10,800	560	10,800	0
OPEN HOLE	6	4+1/2	13.5	10600	14,789	270	14,789	10,600

32. BOP Equipment Type: ☐ Annular Preventer ☒ Double Ram ☐ Rotating Head ☐ None

33. Comments THE PAD AND PITS HAVE BEEN CONSTRUCTED. THE RE-FILE WILL NOT REQUIRE ANY EXPANSION OR ADDITIONAL SURFACE DISTURBANCE OF THE PAD. THE LOCATION DOES NOT REQUIRE A VARIANCE FROM ANY OF THE RULES LISTED IN RULE 306.d.(1).(A).(ii). THE LOCATION IS NOT IN A WILDLIFE RESTRICTED SURFACE OCCUPANCY AREA.

34. Location ID: _____

35. Is this application in a Comprehensive Drilling Plan ? ☐ Yes ☒ No

36. Is this application part of submitted Oil and Gas Location Assessment ? ☐ Yes ☒ No

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: MARIE OKEEFE

Title: REGULATORY COORDINATOR Date: 8/19/2011 Email: marie.okeefe@whiting.com

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

API NUMBER

05 103 11303 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

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Attachment Check List

Att Doc Num	Name
400197841	FORM 2 SUBMITTED
400197857	DRILLING PLAN
400197858	DEVIATED DRILLING PLAN
400197860	PLAT
400198643	LEASE MAP

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)